31 May 1966

The Editor
The Washington Post
Washington, D. C.

Dear Sir,

You are to be congratulated on the highly important article by Richard Harwood, concerning the Warren Report, which appeared on Sunday. It is gratifying that responsible discussion of the assassination has resumed for, as Harwood's article shows clearly, several fundamental problems remain unresolved.

The article properly focuses on the critical question of the authenticity of the description of the President's back wound in the FBI Reports of December 9, 1963 and January 13, 1964. The FBI does not seem to have retracted or admitted error. Moreover, Harwood's story provides the significant new information that the FBI confirmed to The Washington Post on about December 18, 1963, that the first bullet to hit the President lodged deep in his shoulder—which is consistent with the FBI rather than the autopsy description of the wound. I cannot readily believe that the FBI was capable of issuing statements and reports so profoundly in error in an investigation of such enormous gravity. The less so, when (1) the FBI Supplemental Report of January 13, 1964 contains internal evidence of a flow of information from the autopsy surgeon, Commander J. J. Humes, to the FBI; and (2) collateral evidence such as the position of the bullet holes in the clothing, and the testimony of witnesses who saw the President's body, suggests that the FBI findings were accurate.

True, Arlen Specter's evidence is scattered through the 26 volumes of Hearings and Exhibits, but the same scattering has fragmented every other major segment of the evidence. That has rendered research more difficult, but not impossible. And in piecing together the evidence on the single-missile theory, one finds that the testimony and documents in no way support Specter's hypothesis but, on the contrary, leave it without ground on which to stand.

I must take issue with Harwood's assertion that Dr. Robert Shaw was convinced that the intact bullet found on a stretcher at Parkland Hospital "did cause the wounds" sustained by Governor Connolly. Dr. Shaw first deposed (on March 23, 1964) that one bullet could have or did inflict all the Governor's wounds. However, when he later appeared as a witness before the Commission, he was shown the stretcher bullet for the first time. As a result, he modified his original opinion, now saying that the Governor's wounds could have been caused by two or even three bullets. (Dr. Shaw's change of opinion is set forth unambiguously in the transcript of his testimony in the Hearings, Volume IV, pages 109 and 113-114.)

It is true, as Harwood says, that Dr. Shaw testified that it was not uncommon for people to suffer a wound without knowing it immediately. Dr. Shaw added, however, the qualification, "but in the case of a wound which strikes a bony substance such as a rib, usually the reaction is quite prompt." (Volume IV, pages 115-116) I am sure that Harwood would agree that, since the Governor's rib was shattered by the bullet that struck his chest, Dr. Shaw's qualifying remark should not have been omitted. Moreover, at least two other medical witnesses declined to support the alleged delayed reaction by the Governor (see Volume II, page 376, and Volume V, pages 93-94).

The inconsistencies in the record are not "apparent;" they are real.

Yours very sincerely,

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